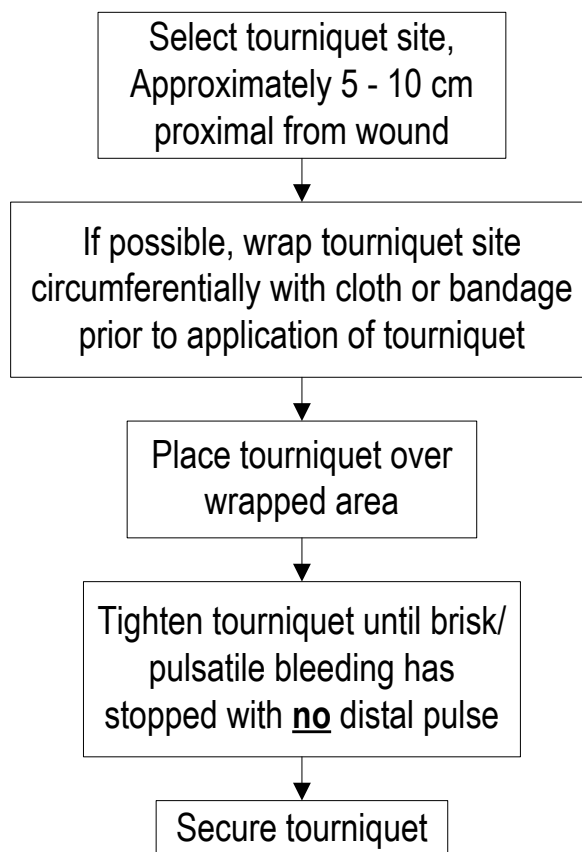


Initial: 10/14/09
Reviewed/revised:
Revision:

**MILWAUKEE COUNTY EMS  
SPECIAL OPERATIONS  
TEMS TOURNIQUET  
APPLICATION**

Approved by: Ronald Pirrallo, MD, MHSA J. Marc Liu, MD, MPH
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<b>Purpose:</b> To stop uncontrolled extremity hemorrhage		<b>Indications:</b> Uncontrolled extremity hemorrhage not responsive to direct pressure	
<b>Advantages:</b> Can be secured in place to control hemorrhage	<b>Disadvantages:</b> May be painful	<b>Complications:</b> Ischemia of extremity with prolonged use (usually over 2 hours)	<b>Contraindications:</b> Only to be used on the extremities, and <b>not</b> the torso, face, head, or neck



**NOTES:**

- Whenever possible, tourniquets should be applied over circumferential clothing remnant or gauze/cling wrap in order to reduce the possibility of skin injury.
- Tourniquets are applied to the injured extremity approximately 5-10 cm proximal to (above) the wound. They should never be applied on a joint. In such cases, the tourniquet can be moved distally (below) or proximally (above) - preferably distal - to the joint.
- A tourniquet should be tightened until brisk/pulsatile bleeding ceases, and there are no detectable distal pulses. The wound may continue to ooze.
- Once placed, a tourniquet should not be removed except under the orders of a physician.
- Every attempt should be made to evacuate a patient with a placed tourniquet to a hospital within 2 hours.